

UST Installation/Upgrade Permit

☐ New Permit ☐ Permit Modification

Installation Company _____ Permit No: _____

Address _____ City _____ State _____ Zip _____ Phone # (____) _____

Certified Installer's on Project (Including subcontracted companies covered under this permit and insurance):

Name _____ Cert. # TL _____ Exp. date _____

_____ Cert. # TL _____ Exp. date _____

_____ Cert. # TL _____ Exp. date _____

Date work will commence _____

Facility ID# (if not a new facility) _____ ☐ Install/Replace ☐ Upgrade

Tank Owner _____ Address _____ City _____ State _____ Zip _____

Contact person _____ Phone # (____) _____

Facility Name _____ Address _____ City _____ State _____ Zip _____

Contact person _____ Phone # (____) _____

Tanks Involved in Installation / Upgrade							
Tank #							
Install/Upgrade							
Capacity (gallons)							
Type (FRP, Steel, etc.)							
Substance to be Stored							
Piping Type (Press., Suction, Gravity)							
Install/Upgrade What? (Tank, Lines, C.P.,...)							

Type of Installation/Upgrade		State Use Only		
Description	Number	Code	Rate	Total

Total Installation Tank Fee/Permit _____

Unusual or extenuating circumstances expected: _____

Mail completed form to:

Utah Department of Environmental Quality
Division of Environmental Response and Remediation
168 North 1950 West, 1st Floor
Salt Lake City, Utah 84116

State Use Only: Date Approved & Pd _____ Approved By _____ Date Permit Mailed _____ CK# _____